

Maryland Department of Health and Mental Hygiene 201 W. Preston Street • Baltimore, Maryland 21201

Martin O'Malley, Governor - Anthony G. Brown, Lt. Governor - Joshua M. Sharfstein, M.D., Secretary

Dear Treatment Provider,

We are writing to ask for your help in addressing the opioid overdose public health crisis in Maryland by encouraging you to provide prescriptions for the opioid overdose antidote naloxone to all patients at their next visit.

Heroin-related overdose deaths have increased by 88 percent between 2011 and 2013 and fentanyl-related deaths have jumped from an average of 2 deaths per month during the years 2007-2012 to 15 deaths per month in late 2013 and 2014.

To combat the opioid overdose epidemic, the State has been taking numerous actions. The most recent action is making naloxone more widely available throughout Maryland both in the Medicaid program and through the Overdose Response Program.

Medicaid

Naloxone will be available in the Medicaid program without preauthorization for all Medicaid patients state-wide. As a result, prescriptions you write for naloxone can be filled at community pharmacies. There is a \$1 copay for generic naloxone, however pharmacies may not deny service to any recipient if they are not able to pay the copay (COMAR 10.09.03.03 (M)).

There are two different routes of naloxone administration: intranasal (prefilled syringe) and intranuscular (vial or prefilled syringe). There are multiple studies showing the efficacy and safety of intranasal naloxone administration. We encourage you to write a prescription for both routes of administration, to optimize availability to patients. We will provide updates on the supply of these formulations on this website: http://dhmh.maryland.gov/naloxone.

Intramuscular	Intranasal
Rx = Naloxone injection 0.4mg/1ml vial and 3cc, 23g, 1 inch syringes Qty = 2 units of each Refill = PRN	Rx = Naloxone 2mg/2ml needless syringe and intranasal mucosal atomizer device Qty = 2 each Refill = PRN
Sig: For suspected opioid overdose, inject 1ml IM in shoulder or thigh, may repeat after 3 minutes if no or minimal response.	Sig: For suspected opioid overdose, spray 1ml in each nostril, may repeat after 3 minutes if no or minimal response.

Overdose Response Program

We strongly encourage you to refer family members and friends of your high risk patients to the Overdose Response Program. The Program authorizes private and public entities to train and certify qualified individuals—e.g. family members, friends and associates of opioid users; treatment program and transitional housing staff; and law enforcement officers— to administer naloxone. Contact information for the 31 programs authorized throughout the State can be found at: http://adaa.dhmh.maryland.gov/NALOXONE/SitePages/Approved%20Entities.aspx.

Thank you for your attention to this matter - early recognition and treatment of opioid overdoses saves lives.

Sincerely,

Joshua M. Sharfstein, M.D.

Secretary

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